

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

APPLICANT(S)

FILING DATE

07-05-0

CLAIMS														
	AS F	ILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		1.		 •	
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TOTAL CLAIMS	12	31.2		2500	4	3, 2.		TOTAL CLAIMS	<u> </u>	* 1.4	II S D	767		

PTO-1360 (3-78)

•MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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